



Docket No. 60326/PJP

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GROUP 1700

Application of : Carolyn E. Mountford et al.  
Serial No. : 09/691,776  
Filed : October 18, 2000  
For : MAGNETIC RESONANCE SPECTROSCOPY OF  
BREAST BIOPSY TO DETERMINE PATHOLOGY,  
VASCULARIZATION AND NODAL INVOLVEMENT

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JUN 23 2003

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TECHNOLOGY CENTER R3700

S I R:

Transmitted herewith is an amendment to the above identified application.

X  Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.

No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE				FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY	
Total Claims	26	-	22	=	4	X	9	18	=	36		
Indepen- dent Claims	8	-	4	=	4	X	40	80	=	160		
Multiple Dependent Claim(s) Presented <u> </u> Yes <u> X </u> No							130	260				
For First Time												
							TOTAL ADDITIONAL FEE		\$196			

\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

\*\*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

\*\*\*If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed

\_\_\_\_\_ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. Three copies of this sheet is enclosed.

X A check in the amount of \$431. is enclosed, for one month extension of time (\$55), the Information Disclosure Statement (\$180) and the extra claims fee (\$196).

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposition Account No. 03-3125. Three copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Peter J. Phillips 6/13/03  
Peter J. Phillips Date  
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